Department of Health and Human Services Responses to CMS Questions of March 14, 2005 Regarding the 3rd HIFA Amendment Submitted March 16, 2005

Questions

1) Attachment E of the application states that, "The Department will send the family a payment coupon each month a premium is owed. Members must return the coupon along with their payment to the Department of Health and Human Services." Will there be a process for a late payment notice? Disenrollment notice? What appeal rights will they have? Since the State is asking to waiver 12 months of continuous enrollment so that they can disenroll due to lack of premium payment, it would be helpful to know the process that will lead up to the disenrollment.

Response: The Department must follow the State's Administrative Procedures Act to adopt rules to charge premiums to Katie Beckett families and to implement other waiver approved changes. The Department expects to issue proposed rules in the near future. As drafted, the proposed rules establish the following policies for payment of premiums by Katie Beckett families.

- Families will be responsible for paying the Department on the first day of the month for which a child receives coverage.
- Families must pay premiums up to date every 3 months. If they don't, the Department will send advance notice of closing to end coverage the last day of the 3rd month. For example: The 1st month of coverage is January. As of March 1, the family has paid the premiums for January, February and March. As of June 1, the family has paid the April premium but they have not paid the May or June premiums. The Department will take action to end MaineCare coverage effective June 30th.
- The grace period for non-payment of premiums will extend through the last day of every 3rd month.

For those MaineCare members already required to pay premiums, the Department sends them a coupon each month they owe a premium. The Department will follow the same policy when it implements premiums for Katie Beckett families. The Department will send families a reminder that their premiums are not paid up to date. This reminder will be sent at the beginning of every $3^{\rm rd}$ month and will be timed to provide 12 day notice and to end coverage at the end of the $3^{\rm rd}$ month.

The Katie Beckett families will have the appeal rights set forth in the State Plan and the MaineCare Eligibility Manual. These are the same rights provided to all MaineCare applicants and members who want to appeal an adverse action regarding their MaineCare eligibility.

2) With regard to the 3 month waiting period for Katie Beckett families

who drop private coverage, does the State intend to disenroll families that are already enrolled in MaineCare when they drop their private coverage?

Response: Yes

3)In Maine's responses dated 2/15/05, on page 2, the State indicates that its revised premium schedule reflects the addition of more FPL tiers for the purpose of establishing the monthly premium amount (Attachment E). Why has Maine added the new bracket of 150-200% FPL? In its previous responses submitted on 6/18/04, Maine had indicated that there were no TEFRA children whose family income is under 200% FPL. (Specifically, this was the State's response to CMS comment #5 in the June document.)

Response: There are a few children whose family income is between 150% - 200% of FPL who are not eligible for the MaineCare SCHIP funded separate program because the children are covered by other private insurance. In this case, they are able to enroll in the MaineCare Katie Beckett eligibility option if they meet the financial and medical requirements. Our previous response(June 2004, #5) was incorrect.